



DEPARTMENT OF THE NAVY
BOARD FOR CORRECTION OF NAVAL RECORDS
2 NAVY ANNEX
WASHINGTON DC 20370-5100

JRE
Docket No: 5272-01
14 November 2002



This is in reference to your application for correction of your naval record pursuant to the provisions of title 10 of the United States Code, section 1552.

A three-member panel of the Board for Correction of Naval Records, sitting in executive session, considered your application on 7 November 2002. Your allegations of error and injustice were reviewed in accordance with administrative regulations and procedures applicable to the proceedings of this Board. Documentary material considered by the Board consisted of your application, together with all material submitted in support thereof, your naval record and applicable statutes, regulations and policies. In addition, the Board considered the advisory opinion furnished by designees of the Specialty Leader for Psychiatry, a copy of which is attached.

After careful and conscientious consideration of the entire record, the Board found that the evidence submitted was insufficient to establish the existence of probable material error or injustice. In this connection, the Board substantially concurred with the comments contained in the advisory opinion. Accordingly, your application has been denied. The names and votes of the members of the panel will be furnished upon request.

It is regretted that the circumstances of your case are such that favorable action cannot be taken. You are entitled to have the Board reconsider its decision upon submission of new and material evidence or other matter not previously considered by the Board. In this regard, it is important to keep in mind that a presumption of regularity attaches to all official records.

Consequently, when applying for a correction of an official naval record, the burden is on the applicant to demonstrate the existence of probable material error or injustice.

Sincerely,

W. DEAN PFEIFFER
Executive Director

Enclosure

and I knew I needed more help than that” and because “I did not have the energy to go” citing a 90-minute commute.

- (d) She began psychiatric care through a civilian provider in 1998. During the course of treatment she was started on paroxetine which was titrated to 50mg daily.
- (e) In July 1999 she received an evaluation by a military psychologist. Psychological testing on 22 JUL 99 suggested diagnoses of Major Depressive Disorder, Dysthymic Disorder, r/o PTSD and r/o Paranoid Personality Disorder. A subsequent military psychiatric evaluation on 29 JUL 99 resulted in diagnoses of Depressive Disorder Not Otherwise Specified, V:Bereavement, Alcohol Abuse and V: Occupational Problem. Documentation from this evaluation stated “she meets psychiatric retention standards.” She was advised to decrease paroxetine to 40mg daily and was started on bupropion SR 150mg daily. She was also advised to abstain from alcohol.
- (f) Psychiatric follow up on 16 AUG 1999 documented that the petitioner was “doing well.” The psychiatrist documented that the petitioner “feels she is making the right decision” regarding civilian life and “feels she will do better in civilian life”. Mental status examination did not reveal evidence of significant active depressive symptoms.
- (g) She was released from active duty on 31 August 1999. Her FITREP from SEP 98-AUG 99 indicated standard or above standard performance in all areas except for military bearing. Military bearing was rated below standard for failure to be in body fat standards. Her FITREP noted “during this rating period she has been preoccupied with personal and professional challenges which have had a negative impact on her overall performance.”
- (h) On 20 FEB 01 the petitioner was denied service connection benefits for depression by the Department of Veteran’s Affairs based on a lack of active symptoms. The findings were appealed and on 13 JUL 01 she was granted a 30% rating for Depressive Disorder Not Otherwise Specified (effective 01 SEP 99) based on depressive symptoms while on active duty as well as symptoms that had recurred around and after FEB 01.

3. The following opinions were submitted:

- (a) Was the petitioner’s discharge from the Navy on an involuntary basis? There was no evidence presented to suggest that the petitioner was discharged against her will.

- (b) Was the petitioner able to receive help from military sources? Based on multiple military medical evaluations between 1989 and 1999 it appears that medical help was available and was utilized by the petitioner. Although the location and timing of follow up appointments after her DEC 97 evaluation were not considered satisfactory to the petitioner, she had the option to continue treatment and chose not to.
- (c) Should the petitioner have been retired by reason of physical disability? The service member did suffer from a psychiatric disorder (Major Depressive Disorder vs. Depressive Disorder Not Otherwise Specified) while on active duty. She has continued to have depressive symptoms since discharge. It is possible that her psychiatric condition negatively impacted her ability to handle occupational and emotional stress. It is also likely that the presence of a depressive disorder and treatment with paroxetine (which is commonly associated with weight gain) contributed to her inability to maintain weight standards. Taking these factors into consideration, it is still unlikely that her psychiatric illness would have necessitated a medical retirement. At the time of discharge, the petitioner appeared to have been benefiting from treatment and was functioning well enough to maintain standard to above standard performance in almost all areas. Her psychiatric evaluations immediately prior to discharge indicated that she was doing well clinically and was considered to "meet psychiatric retention standards." This would suggest that although a psychiatric disorder was present, it was not causing impairment to an extent that would necessitate a medical retirement by reason of physical disability.

4. This review was conducted by [REDACTED] under the supervision of [REDACTED]

[REDACTED]

[REDACTED]